

2674



BAKER BOTTS LLP

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/666,371
	Filing Date	09/20/2000
	First Named Inventor	GEIGER et al.
	Group Art Unit	2674
	Examiner Name	A. L. Abdulselam
Total Number of Pages in This Submission	Attorney Docket Number	A35431 - 067691.0163

ENCLOSURES <i>(check all that apply)</i>		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Revocation and Substitute Power of Attorney <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> CERTIFICATION UNDER 37 C.F.R. § 3.73(b)
Remarks <input type="checkbox"/>		RECEIVED OCT 07 2002 Technology Center 2600

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	BakerBotts LLP 30 Rockefeller Plaza New York, NY 10112
Signature	Att Name: Gary Abelev PTO Reg: 40,479
Date	September 30, 2002

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: <u>September 30, 2002</u>	
Typed or printed name	Gary Abelev
Signature	Date: September 30, 2002

**BAKER BOTTS LLP**

FEE TRANSMITTAL for FY 2002

*Patent fees are subject to annual revision.***TOTAL AMOUNT OF PAYMENT****(\$)** 40*Complete if Known***RECEIVED**

Application Number	09/666,371
Filing Date	09/20/2000
First Named Inventor	GEIGER et al.
Examiner Name	Abbas L. Abdulsalam
Group Art Unit	2674
Attorney Docket No.	A35431 - 067691.0163

OCT 0 7 2002

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METHOD OF PAYMENT		FEE CALCULATION (continued)	
1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to: Deposit Account Number: 02-4377 Deposit Account Name: Baker Botts LLP <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		3. ADDITIONAL FEES	
2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other			
FEE CALCULATION			
1. BASIC FILING FEE			
Large Entity	Small Entity	Fee Description	Fee Paid
Fee (\$)	Fee (\$)		
740	370	Utility filing fee	
330	165	Design filing fee	
510	255	Plant filing fee	
740	370	Reissue filing fee	
160	80	Provisional filing fee	
SUBTOTAL (1)			(\$)
SUBTOTAL (1)			0
2. EXTRA CLAIM FEES			
Total Claims: 20 ** = 0 x Fee from below = 0			
Independent Claims: 3 ** = 0 x Fee from below = 0			
Multiple Dependent Claims: =			
Large Entity	Small Entity	Fee Description	Fee Paid
Fee (\$)	Fee (\$)		
18	9	Claims in excess of 20	
84	42	Independent claims in excess of 3	
280	140	Multiple dependent claim, if not paid	
84	42	** Reissue independent claims over original patent	
18	9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)			(\$)
SUBTOTAL (2)			0
*or number previously paid, if greater; For Reissues, see above			
Other fee (specify)			
SUBTOTAL (3)			(\$)
SUBTOTAL (3)			40

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Gary Abelev	Registration No. (Attorney/Agent)	40,479
Signature		Telephone	(212) 408-2522
		Date	09/30/2002

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